

## THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:

LYLE et al.

Examiner:

Matthew E. Heneghan

Application No.:

09/615,967

Art Unit:

2134

Filed:

July 14, 2000

Docket No.

RECOP001

Title:

SYSTEM AND METHOD FOR COMPUTER SECURITY

## **CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

**Y-3**,2

RECEIVED

Vicki Lorist

AUG 1 1 2004

**Technology Center 2100** 

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	remaining after pr		Highest previously	Present Extra	Small Entity		Large Entity		
			paid for	LXIII	Rate	Additional Fee		Rate	Additional Fee
Total Claims	21	Less	32	0	x \$9 = \$		OR	x \$18 = \$	0
Indep Claims	03	Less	05	0	x \$43 = \$		OR	x \$86 = \$	0
	iple Dependent claim Present & Fee Not previously paid				x \$145 = \$		OR	x \$290 = \$	
					TOTAL ADD'L FEE \$			TOTAL ADD'L FEE \$	0

$\boxtimes$	Applicant(s) hereby petition for a TWO month(s) extension of time to
	respond to the outstanding Office Action.

	Applicant(s) believe that no (additional) Extension of Time is required;					
	however, if it is determined that such an extension is required, Applicant(s)					
	hereby petition that such an extension be granted and authorize the					
	Commissioner to charge the required fees for an Extension of Time under 37					
	CFR 1.136 to Deposit Account No. 50-0685. ( ).					

Updated 08/03/04

Atty. Docket No.

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04 67-1959

08/09/2004 CCHRU1 00000032 09615967

$\boxtimes$	Enclosed is our Check No. <u>1369</u> in the amount of \$420 to cover the additional claim fee and/or extension of time fees.
	Enclosed is Applicant Initiated Interview Request Form, PTOL-413A.
$\boxtimes$	Enclosed are 15 sheets formal drawings.
	Please charge Deposit Account No. 50-0685 ( ) in the amount of \$to cover the additional claim fee and/or extension of time fees.
$\boxtimes$	If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (RECOP001).
	Respectfully submitted, VAN PELT & YI LLP
	Clover Huang: Clover Huang: Registration No. 55,285

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